## SHENANDOAH AREA COUNCIL

# EXPLORER/VENTURER WEEKEND

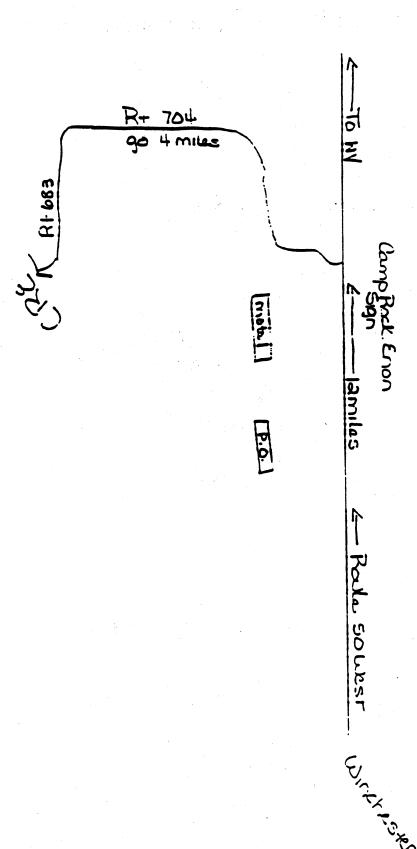
### **BOY SCOUTS OF AMERICA**



SPRING WEEKEND

CAMP ROCK ENON

APRIL 14,15,16, 2000



#### FALL EXPLORER/VENTURE WEEKEND

WHAT:

38<sup>TH</sup> Semi-Annual Explorer/Venture Weekend

WHEN:

April 14, 15, 16, 2000

WHERE:

Camp Rock Enon, Gore, VA (a map is attached)

**CO-CHAIRMEN:** 

Terry Binebrink and Chris Spaid

**REGISTRATION:** Dining Hall

SPECIAL NOTICE: Health Department regulations do not permit dogs, cats or other pets in camp. Alcoholic beverages and non-prescription illegal drugs are prohibited at Camp Rock Enon. Individuals found to be possessing, consuming or under the influence of alcohol or drugs will be IMMEDIATELY SEPARATED FROM CAMP. All firearms and sheath knives are prohibited in camp, anyone found with any of the above will be IMMEDIATELY SEPARATED FROM CAMP.

COST:

\$20.00 must be postmarked by April 7th (\$24.00 if paid after the 7th). Special fee for Posts who bring their own tents for tent camping is \$15.00 must be postmarked by April 7th (\$19.00 if paid after the 7th). Because of the size of the group, we encourage tent camping. Cabin and Adirondacks are ones first come/first serve basis - all fees paid in full at time:of reservation to reserve:a cabin. Tent camping will be done in approved camping areas. All fees are nonrefundable. The price for the weekend includes food, awards and an event patch. Please enclose with registration fees a completed roster of participants. Each Crew and Explorer Post participating must bring a completed health history on each participant - USE THE BACK OF YOUR YOUTH APPLICATION THAT YOU SHOULD KEEP ON FILE.

POST ACCIDENT INSURANCE: Each Unit is required to submit evidence of carrying Health and Accident Insurance. This is due with your Post registration for the weekend. Any Post not carrying insurance will be required to purchase insurance for the weekend at the cost of .65 cents per day per participant. All Shenandoah Area Council Units are covered by insurance.

**AWARDS:** 

- 1) Certificates for each Unit participating
- 2) Patch for each Youth/Leader participating
- 3) Ribbons 1<sup>st</sup>, 2<sup>nd</sup>, 3<sup>rd</sup> Place for Rappelling and Marksmanship
- 4) Plaques Lipsync Contest, Volleyball, Campwide Games
- 5) Trophy  $-1^{st}$ ,  $2^{nd}$ ,  $3^{rd}$  Place over all
- 6) XXI Annual Most Spirited Post Award (based on spirit/sportsmanship points awarded throughout events)

\*Make sure score sheets are turned into Chris as soon as you complete your last activity and before dinner. This is a must.\*

SLEEPING FACILITIES ARE VERY RUSTIC: Participants must provide own sleeping bag, personal gear, warm clothes (appropriate clothing in case of rain) and flash lights. Any Post having their own lanterns and fuel please bring them for your Post to use. Remember to bring your mattress pad if you have one, we do not provide mattresses.

WE STRESS PARTICIPATION: Advisors are encouraged to participate in activities.

Advisors scores will be included in marksmanship.

# ALL-COED UNITS ARE REQUIRED TO HAVE A MALE AND FEMALE ADVISOR DURING THE WEEKEND

#### **ACTIVITIES**

- 1) Campwide Games
  - 1) Cross Country Running
  - 2) Mountain Biking
  - 3) Canoeing
  - 4) Initiative Games
  - 5) Frisbee Toss
- 2) Rappelling –
- 3) Marksmanship -
- 4) Volleyball Tournament -
- 5) Lipsync Contest –

We would appreciate your help! If the first group having canoeing would help take canoes, life jackets and paddles to the lake and the last group would help to return them we would greatly appreciate it.

Please remember to have score sheets with you at all activities and turn them in immediately after completing all activities.

#### **SCHEDULE**

#### **APRIL 14,2000**

7:00pm Registration/Site Assignments - Dining Hall

Games - Monopoly, Trivial Pursuit, Uno, Twister,

Cards, etc

10:30pm Briefing - Marksmanship/Rappelling -

Dining Hall

8:00pm Cracker Barrel - Dining Hall 1:00pm

LIGHTS OUT

#### **APRIL 15.2000**

8:00am - 9:00amBreakfast - Dining Hall

9:00am -10:15am Activity Period 1 10:15am - 11:30am **Activity Period 2** 11:30am - 12:45 **Activity Period 3** 

12:45pm - 1:45pm Lunch

1:45pm - 3:00pm**Activity Period 4** 

3:00pm - 5:00pmVolleyball Tournament

5:00pm - 6:00pmFree Time 6:00pm- 8:00pm Dinner

Free Time – Showers

8:00pm-12:00am Lipsync Contest, Dance, Awards - Bowman Lodge

12:30am Lights Out

#### **APRIL 16, 2000**

8:00am - 9:30am Breakfast - Dining Hall

PLEASE FILL OUT EVALUATION AT THIS

TIME

#### PLEASE CLEAN CAMPSITE AND OR CABIN, PICK UP TRASH - your help is appreciated.

#### **GENERAL RULES**

- Adult leaders with Post at all times 1)
- 2) Vehicles parked in parking lot area only.
- 3) Water may or may not be provided. Some times due to unforeseen problems the water can go off with no warning.
- Post need Advisor's permission to leave campsite and only in pairs. 4)
- 5) Do not cut live trees.
- 6) No fireworks, sling shots, long knives, or other items considered dangerous.
- 7) Report all accidents to Advisor and Medical Officer.
- Review all items, especially score sheet. 8)
- 9) Dress appropriately for the weather, bring rain gear.
- Campsites will be assigned at check in. 10)
- 11) Remove trash and refuse from campsites.
- 12) Roster provided at check in.
- No alcohol or any drugs allowed in camp. Prescriptions drugs need to be registered 13) with Medical Officer.
- 14) Any allergies to food should be made known to cooks so proper preparation can be made.
- 15) BSA REGULATION - ABSOLUTELY NO FOOTBALL - NO EXCEPTIONS
- 16) Units must observe BSA's no smoking policy.

### **EXPLORER/VENTURE WEEKEND SCORE SHEET**

Please carry this sheet with your group throughout the events on Saturday. Turn in sheet at dinner for scoring.

| <b>POST</b> | CREW   | •               |                  |  |
|-------------|--|-----------------|------------------|--|
|             |  |                 |                  |  |
| EVEN        |  |                 |                  | <b>6</b>   |
| Camp        | wide Games (cross country run, m   | ountain bikin   | g, initiative ga | ame, canoeing, frisbee   |
| toss)       |  |                 |                  |  |
|             | Entering Canoe Event   | Time            |                  |  |
|             | Entering Cross Country Run   | Time            |                  |  |
|             | Entering Mountain Biking   | Time            |                  |  |
|             | Initiative Game  | Time            |                  |  |
|             | Frisbee Toss Goals   | Goals           |                  |  |
|             | Sportsmanship/Spirit   | 0-50 points     |                  |  |
|             | $1^{st} = 50 \text{ points}; 2^{nd} = 30 \text{ points}; 3^{rd} =$   | = 10 points     |                  |  |
|             | Total points Campwide Event  | Score           |                  | (signed)   |
| *           | * * * * *  | * *             | * *              | * * *  |
| Volley      | ball Tournament  |                 |                  |  |
|             | Schedule 1st round game by each un   | it. Single elim | ination tourna   | ment by 6 player teams   |
|             | (larger posts may enter two or mor   | re teams with   | all different pl | layers and overall score   |
|             | will be averaged.  |                 |                  | •  |
|             | Post participation   | 50 points       |                  |  |
|             | Spirit/Sportsmanship   | 0-40 points     |                  | •  |
|             | First Place  | 50 points       |                  |  |
|             | Runner Up  | 25 points       |                  |  |
|             | Total Volleyball Score   | •               |                  | (signed)   |
| *           | * * * *  | * *             | * *              | * * *  |
| THES        | SE EVENTS YOUR UNIT WILL V   | VORK IN AM      | IONG YOUR        | SCHEDULED  |
|             | PWIDE EVENT AND VOLLEYBA   |                 |                  |  |
|             |  |                 |                  |  |
| EVEN        | NTS:   |                 | •                | •  |
| Rapp        | elling   |                 |                  |  |
|             | Participation by all able-bodied pos   | t members:      | 50 points        |  |
|             | Spirit/Sportsmanship 0-10 points   |                 | •                |  |
|             | Total Rappelling Score   |                 |                  | (signed)   |
| *           | * * * *  | * *             | * *              | * * *  |
| Mark        | smanship   |                 |                  |  |
|             | Participation by all post members:   |                 | 50 points        |  |
|             | Spirit/Sportsmanship 0-10 points   |                 |                  |  |
|             | $1^{st} = 50 \text{ points}; 2^{nd} = 30 \text{ points}; 3^{rd} = 30 \text{ points}; 3^{r$ | = 10 points     |                  |  |
|             | Total Marksmanship Score   | - F             |                  | (signed)   |
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| Gran        | d Total  |                 |                  | and the second s |
| ~ . a.u.    | - A VIOL   |                 |                  |  |

TO: Explorer/Venturer Division, BSA
Terry Binebrink & Chris Spaid
107 Youth Development Court
Winchester, VA 22602
540-662-2551 - 8am-5pm or 540-667-1154 after 5pm
540-662-2725 - Fax or E-Mail <a href="mailto:chrisspaid@hotmail.com">chrisspaid@hotmail.com</a>

| Post/CREW   | Council will                                |                       |               |                         |
|---|---|-----------------------|---------------|-------------------------|
| Participate in the 3 explorers/venturers participants at \$15 | participants; or \$24.00 for                |                       |               |                         |
| participants at \$15.   | .00 or \$19.00 (after April 7 <sup>th</sup> | ). Early fees must be | postmarked by | April 7 <sup>th</sup> . |
| LIPSYNC CONTE   | (choose 1)                                  |                       |               |                         |
| (we need this infor   | (GROOSE 1)                                  |                       |               |                         |
| Contact Person:   | Name  |                       |               |                         |
|   | Address                                     |                       |               |                         |
|   | (street/state/zip)                          |                       |               |                         |
|   | Phone(H)                                    | (W)                   |               |                         |
|   | NAME  | M/F                   | Y/A           | PAID                    |
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